Amendments to the Claims:

This listing of claims will replace all prior versions, and listings of claims, in the application:

Listing of Claims:

1-18. (canceled)

19. (Amended) An ocular pressure spike shunt for insertion into an ocular paracentesis incision port following ocular surgery, comprising a flexible fluid transfer tube formed of biocompatible material, preferably biocompatible elastomeric material, so as to allow paracentesis incision closure around said tube, having ~~an inner~~ a distal end and ~~an outer~~ a proximal end, a tubular lumen disposed between said ~~inner~~ distal end and said ~~outer~~ proximal end to allow fluid communication through said tube, said lumen containing a valve for controlling pressure in the eye following ocular surgery, which valve opens permitting fluid flow through said tube when a predetermined pressure is exceeded, said shunt being configured such that on insertion into a paracentesis port said ~~outer~~ proximal end is substantially flush with the surface of the cornea, and said ~~inner~~ distal end opens into the anterior chamber of the eye, wherein the tube is removable from the eye.

20. (Amended) A shunt according to claim 19 wherein said predetermined pressure is 10 mm Hg.

21. (Amended) A method for preventing ocular pressure spikes following ocular surgery wherein a paracentesis incision port is formed in the eye during said surgery, comprising introducing an ocular pressure spike shunt into said paracentesis port at the conclusion of ocular surgery, said shunt comprising a flexible fluid transfer tube formed of biocompatible material, preferably biocompatible elastomeric material,

so as to allow paracentesis incision closure around said tube, having ~~an inner~~ a distal end and ~~an outer~~ a proximal, a tubular lumen disposed between said ~~inner~~ distal end and said ~~outer~~ proximal end to allow fluid communication through said tube, said lumen containing a valve for controlling pressure in the eye following ocular surgery, which valve opens permitting fluid flow through said tube when a predetermined pressure is exceeded, said shunt being configured such that on insertion into a paracentesis port said ~~outer~~ proximal end is substantially flush with the surface of the cornea, and said ~~inner~~ distal end extends into the anterior chamber of the eye, wherein the tube is removable from the eye.

22. (New) A method of placing an ocular device into the eye, comprising:

providing a fluid drainage tube with an internal passageway having a first end and a second end;

performing a paracentesis with respect to the cornea and the anterior chamber of the eye;

introducing the fluid drainage tube into the anterior chamber and into the suprachoroidal space; and

positioning the fluid drainage tube such that the first end of the internal lumen of the drainage tube opens into the suprachoroidal space and the second end of the internal lumen of the drainage tube opens into the anterior chamber.

23. (New) A method as in claim 22, further comprising using a gonioscope during introduction of the fluid drainage tube into the anterior chamber.

24. (New) A method as in claim 22, further comprising filling the anterior chamber with a viscoelastic substance.

25. (New) A method as in claim 22, wherein the paracentesis is performed in the limbus.

26. (New) A method as in claim 22, further comprising forming a self-sealing incision through the cornea into the anterior chamber and introducing the fluid drainage tube into the anterior chamber through the self-sealing incision.

27. (New) A method of placing an ocular device into the eye, comprising:

providing a fluid drainage tube with an internal passageway having a first end and a second end, wherein the fluid drainage tube can transition from a first state of reduced size to a second state of enlarged size;

forming an opening into the anterior chamber of the eye;

inserting the fluid drainage tube into the anterior chamber while the fluid drainage tube is in the first state of reduced size;

positioning the fluid drainage tube such that the first end of the internal lumen of the drainage tube opens into the suprachoroidal space and the second end of the internal lumen of the drainage tube opens into the anterior chamber; and

causing the fluid drainage tube to expand to the second state of enlarged size while the fluid drainage tube is in the eye.

28. (New) A method as in claim 27, wherein the fluid drainage tube expands while the fluid drainage tube is positioned in the suprachoroidal space.

29. (New) A method as in claim 27, wherein fluid drainage tube has an anchor that expands from the first state to the second state.

30. (New) A method as in claim 29, wherein the anchor is folded when the fluid drainage tube is in the first state.